Art Unit : 1647   **Customer No.: 035811**
Examiner : Robert S. Landsman
Serial No. : 09/481,990
Filed : January 11, 2000   Docket No.: 1201-DIV-00
Inventors : Florian Lesage
: Eric Guillemare
: Michel Fink   Confirmation No.: 6424
: Fabrice Duprat
: Michel Lazdunski
: Georges Romey
: Jacques Barhanin
Title : ISOLATED TWIK-1 POTASSIUM
: CHANNEL PROTEINS   Dated: May 23, 2005

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Official Action dated November 22, 2004, please amend the application

as follows:

Amendments to the specification begin on pg. 2 of this paper.

Amendments to the claims begin on pg. 3 of this paper.

Remarks/Argument begin on pg. 4 of this paper.

Attorney Docket No.: 1201-DIV-00

In re Application of Florian Lesage et al.

Serial No.: 09/481,990

Filed: January 11, 2000

For: ISOLATED TWIK-1 POTASSIUM CHANNEL PROTEINS

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

___ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.

___ A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.

_x_ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NO. PRE-VIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY RATE	ADD'L FEE	OR	OTHER THAN SMALL ENTITY RATE	ADD'L FEE
TOTAL	*2	-	**30 =	0	x 25 =	$		x 50 =	$
INDEP.	*2	-	** 4 =	0	x 100 =	$	OR	x 200 =	$
Application Size Fee						$		x 250 =	$
First Presentation of Multiple Dependent Claim					+180 =	$		+360 =	$

TOTAL ADDITIONAL FEE $_____   OR $_____

*   If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
**   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

___ Please charge my Deposit Account No. 50-2719 in the amount of $_____. A duplicate copy
      A duplicate copy of this sheet is enclosed.

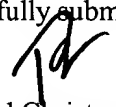___ A check in the amount of $_____ is attached.

<u>x</u>   The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.

       <u>x</u>   Any filing fees under 37 CFR §1.16 for the presentation of extra claims.

       <u>x</u>   Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.

Respectfully submitted,

T. Daniel Christenbury, Reg. No. 31,750
Paul Carango, Reg. No. 42,386
Attorneys for Applicants

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